

DO/EO BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER: 09 / 700168 RECEIPT DATE: 11 / 09 / 00  
IA NUMBER: PCT/ JP00 / 01510 IA FILING DATE: 03 / 13 / 00  
FAMILY NAME: KONDO DELAY WAIVED (Y/N): Y  
GIVEN NAME: TETSUJIRO DEMAND RECEIVED (Y/N): N  
PRIORITY CLAIMED (Y/N): Y PRIORITY DATE: 03 / 12 / 99  
NO BASIC FEE (Y/N): N US DESIGNATED ONLY (Y/N): N  
ATTORNEY DOCKET NUMBER: 450101 02398 COUNTRY:  
CORRESPONDENCE NAME/ADDRESS: CUSTOMER NUMBER: 000000 TELEPHONE 0000000000  
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STATE/COUNTRY: NY ZIP: 10151  
EMAIL:  
APPLICATION TITLES:  
DATA PROCESSING APPARATUS DATA PROCESSING METHOD AND MEDIUM

TAB TO LAST POSITION, PUSH SEND



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Bib Data Sheet

SERIAL NUMBER 09/700,168	FILING DATE 11/09/2000 RULE -	CLASS 369	GROUP ART UNIT 2651	ATTORNEY DOCKET NO. 450101-02398
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**APPLICANTS**

Tetsujiro Kondo, Tokyo, JAPAN;  
 Junichi Ishibashi, Saitama, JAPAN;

*b1*  
**\*\* CONTINUING DATA \*\*\*\*\* YES**

THIS APPLICATION IS A 371 OF PCT/JP00/01510 03/13/2000

*b1*  
**\*\* FOREIGN APPLICATIONS \*\*\*\*\* YES**

JAPAN 11/66635 03/12/1999

**IF REQUIRED, FOREIGN FILING LICENSE  
GRANTED \*\* 12/06/2000**

Foreign Priority claimed	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY JAPAN	SHEETS DRAWING 19	TOTAL CLAIMS 33	INDEPENDENT CLAIMS 21
35 USC 119 (a-d) conditions met	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	<i>Frommer</i>	Examiner's Signature	Initials		

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*20999*

**TITLE**

Data processor, data processing method, and recorded medium

<b>FILING FEE RECEIVED</b> 2534	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees ( Filing )
		<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )
		<input type="checkbox"/> 1.18 Fees ( Issue )
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